MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. 10/58/333

FILING DATE

CLAIMS

	AS FILED		AFTER 1"AMENDMENT		AFTER 2 MAMENDMENT			AS FILED		AFTER 1*AMENDMENT		AFTER 2 MAMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEF
1							51						
2							52						
3		1			-	 	53 54						
5							55		· -				
6		-1					56						
7	1	1				·	57						
8							58						
9							59						
10							60						
11							61						
12							62						
13						L	. 63						
14						ļ	64						
15				ļ		ļ	65						
16		1				-	66 67		 			-	
17 18		1		 			68						
19				-			69		 				-
20	-					 	70	-					1
21	-						71						
22					-		72						
23							73						
24							74						<u> </u>
25							75						<u> </u>
26					_		76				ļ		 -
27				ļ		 	77				-		
28				 			78 79	-			 		-
29 30							80				 		
31							81				 		
32			l	1			82						
33		-					83				<u> </u>		
34			·				84						
35							85						
36							86				<u> </u>		ļ
37							87		<u> </u>			<u> </u>	ļ
38		<u> </u>		ļ		_	88				 	ļ	├
39	 _						89					 	
40			_	 		1	90 91					 	+ -
41	 	-		-		 	91				 	 	
42 43	 	 	 			 	93				 		
43 44							94					Ī	
45							95						1
46							96						
47							97						
48							98						
49							99				<u> </u>		ļ
50							100						
OTAL IND.	12	1	-	1		1	TOTAL IND.		1		1		1
OTAL DEP.	12	4 =		4		4	TOTAL DEP.		4		+		4
OTAL	77					pore de a	TOTAL CLAIMS		e service				* Ya
AIMS	$\mathcal{L}\mathcal{L}$	CANAL SERVICE		A STATE OF		I HOUSE AND THE	CLAIMS	Щ.		TMENT of C		<u> </u>	4 4 5 5 5